



Mt. Pleasant Recreation Department

Adult Basketball Roster

Manager: _____

Email: _____

Sport: Adult Basketball Division: _____

Jersey Color: _____

Team Name: _____

NOTE: *Place an asterik(*) next to the Asst Manager(s). Anyone using illegal resident address may be barred from Mt. Pleasant Recreation Department activities permanently.

PLAYER'S NAME		ADDRESS				Birthdate			PHONE		RECEIPT	
	Last	First	Street	City	Zipcode	Mo	Day	Yr	Home	Work	Date	Number
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League Fee:		NR Fee:		Misc Fees:			Total Due:				
/		/		/			/				
Manager's Signature		Date		Verified By		Date		Receipt #		Frontdesk Staff	